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State Needs Health Costs Controls, Council Is Told

By HARRIET LUDWIG
Times-Union Staff Writer

TAMPA — Florida needs state health costs controls, a militant consumer advocate told the Costs Containment Committee at the opening session of the Statewide Health Coordinating Council (SHCC) meeting in Tampa Thursday.

And a spokesman for the Honeywell Avionics plant in St. Petersburg warned that private enterprise must do the job or there will be more state and federal health care controls.

Donald Rubin, president of the Consumer Commission on Accreditation of Health Services, a volunteer consumer advocacy group in New York, said Health Systems Agency (HSA) plans lack effectiveness because they are not backed by laws.

"We have had clients who were gouged by Florida hospitals which have no regulations," he said.

"One man died of cancer after 47 days in a Miami hospital and his family got a bill for \$47,000. I told the hospital it will not be paid unless they want to document the charges in court."

SHCC President Gene Parks of Jacksonville read a Florida Times-Union report of a recent HSA meeting there where approval was given to both Memorial Hospital's request for a heart catheterization unit and the HSA plan which said no more such units were needed. An HSA member was quoted as saying he and others abstained from voting because they knew the unit was not needed but feared their projects would be opposed if they voted against it.

HSA boards are composed of both health-care providers and consumers. They must approve or reject hospital requests for space or equipment costing over \$100,000 to prevent duplication of services and higher costs.

"This is a common problem," Parks said, "An SHCC must address it."

"There are a lot of political pressures on the HSAs," added Ray Chamlis of the State Bureau of Community Medical Facilities. "And a lot of the consumers are brain-washed by the providers."

Rubin's answer was that consumers are intimidated by the expertise of the professionals, and need independent researchers to challenge health-care providers.

His own commission was formed for that reason, he said, and has challenged — and won — cases of exorbitant hospital bills and excessive Medicare and Medicaid rates.

In one case, he said, a hospital was closed after the commission documented low standards.

"Consumers need more education," he stressed.

"They need more voice in health care. Hospital boards should meet the same provider-consumer ratios as HSA's."

"The medical market is not free enterprise," he pointed out, citing price-fixing by doctors in hospitals.

"Hospitals should share services and use joint purchasing to cut costs. Hospitals in Hartford, Conn., have formed a consortium. They have joint staffing and share equipment to cut costs. Everyone doesn't have to have his own CAT scanner."

Rubin backs the use of Health Maintenance Organizations (HMO), as did Gerald Bowman, personnel manager for Honeywell.

That firm helped establish an HMO in Pinellas County, he said, and has expanded its health benefits for employees. At-home convalescence is being investigated as a possible source of cost-cutting.